



# Parking Violation Processing Form

## Personal Information

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 (Name)

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 (Address)

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 (City)

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 (State)

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 (Zip)

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 (Phone Number)

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 (Citation Number)

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 (License Plate Number)

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 (Signature)

## Response to Notice of Violation

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**I wish to pay the required penalty fee(s).**

You MUST fill in the personal information above, including your signature. Mail this form and a Check or Money Order to the correspondence address below. **DO NOT SEND CASH.** The City of Scottsdale cannot accept partial payments for a parking violation. If you are mailing a late payment please be sure to include the escalated fee amount indicated on your Notice of Violation.

☐ Visa

☐ Master Card

☐ American Express

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 (Card Number)

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 (Expiration Date)

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 (Cardholder Name)

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 (Cardholder Phone)

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**I wish to plead Not Responsible. I am requesting a Hearing at City Court in which I will appear in person.** You MUST fill in the personal information above, including your signature so the date and time to appear can be mailed to you. Mail this form to the correspondence address below.

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**I wish to plead Not Responsible. I am requesting a Hearing by Declaration.** You MUST fill in the personal information above, including you signature. You MUST live outside Maricopa County to be eligible for a Hearing by Declaration. Mail this form to the correspondence address below. By choosing a Hearing by Declaration you can avoid appearing in person. If you choose this option, you will be required to file a written declaration of the facts surrounding the parking violation. Your request for a Hearing by Declaration must be received within 20 days of the Notice of Violation issue date. Upon receipt of your request at City of Scottsdale, PO Box 1929, Scottsdale, AZ 85251 a declaration form will be mailed to you along with a copy of the Complaint and Summons. The officer who issued the Notice of Violation will also be required to submit a similar declaration. A Hearing Officer will consider both declarations and issue a finding of Responsible or Not Responsible. You will be notified of the decision by mail. If you indicate this option and live inside Maricopa County, a hearing will be set for a date to appear.

**Correspondence Address: PO Box 1929, Scottsdale, AZ 85252**